PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

. +1
AUS 920011027US1

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			12				1	RATE	FEE	ſ	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			10		*			X\$ 9=		OR	X\$18=		
			/ minus 20=		•					On		02/	
INDEPENDENT CLAIMS			4 minus 3 =					X42=		OR	X84=	84	
MULTIPLE DEPENDENT CLAIM PRESENT						L		+140=	·	OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in o						olumn 2		TOTAL		OR	TOTAL	824	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							.	SMALL	ENTITY	OR	OTHER SMALL		
NTA	·	(Column 1) . CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	• 12	Minus		20	-	1	X\$ 9=		OR	X\$18=		
MEN	Independent	• 4	Minus	atra	4	= /	1	X42=		OR	X84=/		
<u>₹</u>	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM		J	+140=		OR	1 280=		
,										OR	TOTAL ADDIT, FEE		
		(Column 1)		(Colu	ımn 2)	(Column 3))	ADDIT. FEE					
NT B		CLAIMS REMAINING AFTER AMENDMENT		HIG NUM PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
DME	Total	*	Minus	#A .		=		X\$ 9=		OR	X\$18=		
AMENDMENT	Independent	ŧ	Minus	***		=		X42=		OR	X84=		
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	IT CLAIM		J	+140=		OR	+280=		
,								TOTAL		OR	TOTAL		
	•			(O - I		'/Column 2	11	ADDIT. FEE			ADDIT, FEE		
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIG NUI PREV	JMN 2) HEST MBER HOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NO.	Total	*	Minus	**		=].	X\$ 9=		OR	X\$18=		
Z E E	Independent	*	Minus	***	-	=-		X42=		OR	X84=		
 	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									1			
١.			the ester is est	mas um	#e *0" in ~	olumo 3		+140=	<u> </u>	OR	+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											ADDIT. FEE	<u></u>	
"	"If the "Highest Nu The "Highest Nur	imber Previously nber Previously P	Paid For IN TH aid For (Total o	r Indeper	e is less the adent) is th	an 3, enter 3. e highest num	ber fo	ound in the ap	propriat bo	ox in c	olumn 1.		